## **Application Data Sheet**

Middle Name::

Application Information	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	Paper
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	"IMPROVED SELF-CENTERING UNIT"
Attorney Docket Number::	CORGHI17
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	10
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	ITALY
Status::	Full Capacity
Given Name::	Remo

Name Suffix::	
City of Residence::	CORREGGIO
State or Province of Residence::	REGGIO EMILIA
Country of Residence::	ITALY
Street of Mailing Address::	1 Galleria Carducci
City of Mailing Address::	CORREGGIO
State or Province of Mailing Address::	REGGIO EMILIA
Country of Mailing Address::	ITALY
Postal or Zip Code of Mailing Address::	I-42015
Applicant Authority Type::	Inventor
Primary Citizenship Country::	ITALY
Status::	Full Capacity
Given Name::	Enrico
Middle Name::	
Family Name::	SANTORO
Name Suffix::	
City of Residence::	CASALECCHIO DI RENO
State or Province of Residence::	BOLOGNA
Country of Residence::	ITALY
Street of Mailing Address::	50 Via Venezia
City of Mailing Address::	CASALECCHIO DI RENO
State or Province of Mailing Address::	BOLOGNA
Country of Mailing Address::	ITALY
Postal or Zip Code of Mailing Address::	I-40033
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	

CORGHI

Family Name::

State or Province of Residence::	
Country of Residence::	•
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address::	
Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of Mailing Address::	
Country of Mailing Address::	
Postal or Zip Code of Mailing Address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**Correspondence Information** 

Correspondence Customer Number::

001444

Representative Information

Representative Customer Number::

001444

**Domestic Priority Information** 

Application::

Continuity Type::

Parent Application::

Parent Filing

Date::

**Foreign Priority Information** 

Country::

Application Number::

Filing Date::

Priority Claimed::

ITALY

RE2003A000089

09/29/03

Yes

**Assignment Information** 

Assignee Name::

CORGHI S.P.A.

Street of Mailing Address::

9. Strada Statale 468

City of Mailing Address::

**CORREGGIO** 

State or Province of Mailing Address::

**REGGIO EMILIA** 

Country of Mailing Address::

**ITALY** 

Postal or Zip Code of Mailing Address::

I-42015